

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF NYJEE BOYD		COURT CASE NUMBER 22-CV-8549 (NSR)
DEFENDANT CORRECTION OFFICER CHARLES GUTHRIE, et al.		TYPE OF PROCESS Summons & Complaint
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Correctional Officer Gonzalez	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Sing Sing Correctional Facility, 354 Hunter Street, Ossining, New York 10562-5442	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Nyjee Boyd, 15-B-2063 Coxsackie Correctional Facility P.O. Box 999 Coxsackie, NY 12051-0999		Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):		

Signature of Attorney, other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

S. Harrold

11/2/2022

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. 051	District to Serve No. 051	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 11/12/22
I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.					
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)					
Name and title of individual served (if not shown above) <i>A. SIRI, IR C.O.</i>				Date 12/28/22	Time 2:00 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
Address (complete only different than shown above)				Signature of U.S. Marshal or Deputy <i>[Signature]</i>	

Costs shown on attached USMS Cost Sheet >>

REMARKS

*SERVICE 4 HR = 260
MI 84 mi = 52.50
TOTAL 312.50*

U.S. DEPARTMENT OF JUSTICE
U.S. MARSHAL SERVICE
S.D. OF N.Y.
2022 DEC 28 11:17 AM